## Sample Card

* Required Field						
☐ Metric ☐ English	1					
t May Be Required Based or	HiCAMS #:					
* Material:						
t Sample Owner:		t Contract #:				
* Testing Category:		_ Field ID:				
Check Sample?	Y N (Circle One)	Proj/Po/Wo#:				
t Related Sample ID:		_ Line Item #:				
t Corr. Sample ID:		_ RE:				
# of Pieces:		* Rep. Qty:				
* To Be Used In:						
Comment:						
* Sample Date:		* Sample By:				
* Sample From:		Truck/ Container #:				
	I US NC SR (Circle One)	- Alignment:				
Route Number:		* Location:		Offset Dist:		
Map Number:		* Sta. From:	+	Sta. To:	+	+
County:		_ Coastal Plain:	Y N (circle One	)		
Other						
10 10 10 11						
			t Plant ID:			
			Shelf Life Date:			
			t Asphalt Mix/			
t Concrete Mix:			JMF ID:			
t Alternate Ids Type: Prefix: Range: Description of Items:						
		-		-		
Please use reverse side for test d	ata, comments, and additional informati	on. Check here if more on rever	se			